

(Agency Name) (Address)	PAYMENT VOUCHER AUTHORIZATION (Official Receipt)			No. 36332
Pay to:				
CLASSIFICATION OF PAYMENTS				
Description of Items	Sub-Account	Account No.	Object	Amount
			TOTAL	
INSTRUCTIONS: One copy for payee; One copy for bookkeeper; One copy for cashier.	Payment Authorized _____ Date _____			Check No. _____ Issued: _____
	Signature _____			